



Pascua Yaqui TRBHA  
CENTERED SPIRIT PROGRAM  
Provider Manual - 2023



**Section 3.13** Covered Behavioral Health Services

- I. Statement of Purpose
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**I. STATEMENT OF PURPOSE:**

The Arizona Health Care Cost Containment System (AHCCCS) system of care offers an assortment of covered behavioral health services to meet the individual needs of persons seeking behavioral health services. The continuum of available services includes supervised and semi-supervised facility-based care, an array of treatment services and support services. Covered behavioral health services assist and encourage each person to achieve and maintain the highest possible level of health and self-sufficiency. The provision of covered behavioral health services is contingent on each person's current eligibility status and, for some persons, may be based on available funding.

**II. REFERENCES:**

The following Pascua Yaqui (PY) Centered Spirit Program (CSP) Provider Manual Sections can serve as additional resources for this content area:

- Section 3.1, Accessing and Interpreting Eligibility Information and Screening and Applying for AHCCCS Health Insurance*
- Section 3.4, Co-payments*
- Section 3.21, Service Prioritization for Non-Title XIX/XXI Funding, Persons Determined to have a Serious Mental Illness (SMI)*

The following citations and AHCCCS document also serve as resources for this content area:

- 42 CFR Part 400
- 42 CFR Part 403
- 42 CFR Part 411
- 42 CFR Part 417
- 42 CFR Part 422
- 42 CFR Part 423
- R9-22-1205
- R9-31-1205
- AHCCCS/TRBHA Intergovernmental Agreement (IGA) 2021



### III. **STANDARDS:**

CSP and its providers provide medically necessary covered behavioral health services, within their scopes of practice, based upon the needs of the person.

Services are provided in collaboration with other agencies to coordinate the culturally appropriate delivery of behavioral health covered services with other services and supports provided to the person and the person's family.

Covered behavioral health services are made available to family members of persons enrolled with CSP to the extent that services are provided in support of the treatment goals of the identified eligible or enrolled person.

### IV. **PROCEDURES:**

#### A. **Covered services matrix:**

The AHCCCS covered services matrix: Attachment 3.13.1, Covered Services Matrix lists the available covered behavioral health services for each population of TRBH- enrolled persons and Non-Title XIX/XXI SMI persons. These services must be provided by AHCCCS registered providers.

Attachment 3.13.1, Covered Services Matrix is a condensed summary of available behavioral health services and related funding sources.

#### B. **Flex funds:**

TRBHAs and/or their subcontracted providers may provide flex funds up based on available funding.

#### **When can flex funds be used?**

Flex funds may only be used for non-medically necessary goods and/or services that are described in the person's service plan that cannot be purchased by any other funding source. Furthermore, the member receiving flex funds must meet the population requirements of respective block grant from which the funds originated. The goods and/or services to be provided using flex funds must be related to one or more of the following outcomes:

1. Success in school, work or other occupation;
2. Living at the person's own home or with family;
3. Development and maintenance of personally satisfying relationships;



4. Prevention or reduction in adverse outcomes, including arrests, delinquency, victimization, and exploitation; and/or
5. Becoming or remaining a stable and productive member of the community.

When can flex funds not be used?

Flex funds must not be used for:

1. Inpatient or other covered behavioral health services;
2. The purchase or improvement of land;
3. The purchase, construction, or permanent improvement of any building or other facility (with the exception of minor remodeling consistent with this Section); or
4. The purchase of major medical equipment; and
5. Any other prohibited activity as detailed in 45 CFR Part §96.135 et seq.

TRBHAs and/or their subcontracted providers must use flex funds for the direct purchase of goods and/or services and may not provide flex funds as direct cash payments to behavioral health recipients or their families.

How are flex funds accessed?

Each TRBHA may approve flex fund services of up to \$1,525 per individual/family per year.

Approval of flex fund expenditures are made by the Pascua Yaqui Health Services Division (HSD) Executive Director based on available funding and the following criteria:

1. A determination that the requested goods and/or services cannot be purchased by any other funding source; and
2. A determination that the flex fund expenditure is described in the person's service plan.

The TRBHA must forward requests for approval of flex fund expenditures of \$1,525 or more to [flexfunds@azahcccs.gov](mailto:flexfunds@azahcccs.gov), using *Form 3.13.1, SAPT/CMHS Flex Fund Request*. All documentation supporting the need and utilization of flex funds including, yet not limited to, original receipts for goods or services



purchased, and service plan indicating how the good or service relates to the treatment goals must be made accessible to the TRBHA and AHCCCS for auditing and financial tracking purposes. TRBHAs must have a written procedure indicating where all supporting documentation is to be stored.

**PM ATTACHMENT 3.13.1**

Covered Services Matrix

AVAILABLE BEHAVIORAL HEALTH SERVICES\*

SERVICES		Title XIX/XXI CHILDREN AND ADULTS	NON- Title XIX/XXI PERSONS DETERMINED TO HAVE SMI
<b>TREATMENT SERVICES</b>			
Behavioral Health Counseling and Therapy	Individual	Available	Provided based on available funding
	Group	Available	Provided based on available funding
	Family	Available	Provided based on available funding
Behavioral Health Screening, Behavioral Health Assessment and Specialized Testing	Behavioral Health Screening	Available	Provided based on available funding
	Behavioral Health Assessment	Available	Available
	Specialized Testing	Available	Provided based on available funding
Other Professional	Traditional Healing	Provided based on available funding	Provided based on available funding
	Auricular Acupuncture	Provided based on available funding	Provided based on available funding
<b>REHABILITATION SERVICES</b>			
Skills Training and Development	Individual	Available	Available
	Group	Available	Available
	Extended	Available	Available
Cognitive Rehabilitation		Available	Available
Behavioral Health Prevention/Promotion Education		Available	Available
Psychoeducational services and ongoing Support to maintain employment	Psychoeducational Services	Available	Available



SERVICES		Title XIX/XXI CHILDREN AND ADULTS	NON- Title XIX/XXI PERSONS DETERMINED TO HAVE SMI
	Ongoing support to maintain employment	Available	Available
<b>MEDICAL SERVICES</b>			
Medication Services ***		Available	Available
Lab, Radiology and Medical Imaging		Available	Available
Medical Management		Available	Available
Electro-Convulsive Therapy		Available	Provided based on available funding
<b>SUPPORT SERVICES</b>			
Case Management		Available	Available*****
Personal Care		Available	Available
Home Care Training (Family)		Available	Available
Self-help/Peer Services		Available	Available
Home Care Training to Home Care Client (HCTC)		Available	Provided based on available funding
Respite Care****		Available****	Available****
Supported Housing		Provided based on available funding**	Provided based on available funding**
Sign Language or Oral Interpretive Services		Provided at no charge to the member	Provided at no charge to the member
Flex Fund Services		Provided based on available funding**	Provided based on available funding**
Transportation	Emergency	Available	Limited to crisis service-related transportation
	Non-emergency	Available	Available
<b>CRISIS INTERVENTION SERVICES</b>			
Crisis Intervention – Mobile		Available	Available
Crisis Intervention – Telephone		Available	Available
Crisis Services – Stabilization		Available	Available
<b>INPATIENT SERVICES</b>			
Hospital		Available	Available but limited*****



SERVICES	Title XIX/XXI CHILDREN AND ADULTS	NON- Title XIX/XXI PERSONS DETERMINED TO HAVE SMI
Behavioral Health Inpatient Facility	Available	Available but limited*****
<b>RESIDENTIAL SERVICES</b>		
Behavioral Health Residential Facility	Available	Available but limited*****
Room and Board	Provided based on available funding	Provided based on available funding
<b>BEHAVIORAL HEALTH DAY PROGRAMS</b>		
Supervised Day	Available	Available
Therapeutic Day	Available	Provided based on available funding
Medical Day	Available	Provided based on available funding

**Limitations:**

- \* For services available through federal block grants, please see *Section 3.19, Special Populations*.
- \*\* Services not available with Title XIX/XXI funding, but may be provided based upon available grant funding and approved use of general funds.
- \*\*\* See the CSP Formulary for further information on covered medications.
- \*\*\*\* Respite Care: Respite care is offered as a temporary break for caregivers to take time for themselves. A member’s need is the basis for determining the number of respite hours used. The maximum number of hours available is 600 hours within a 12 month period of time. The 12 months will run from October 1 through September 30 of the next year.
- \*\*\*\*\* A person may be assigned a Behavioral Health Technician (BHT), based on his/her needs.
- \*\*\*\*\* Coverage is limited to 23 hour crisis observation and stabilization services, including detoxification services. Up to 72 hours of additional crisis stabilization may be covered based upon the availability of funds.